FILED
U.S. DISTRICT COURT
DISTRICT OF MARYLAND

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MARYLAND

2019 NOV 14 P 3: 59

AT GREENBELT

BA M Debut A

Paula Bolemle Afisefinni

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-against-

CliftonhassonAllen LLP

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Complaint for Employment Discrimination

No. CBD 19 CV 328 4

(to be filled in by the Clerk's Office)

Jury Trial:

Yes □ No (check one)

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Parla Bolante AJISEFINNI
Street Address	1138 Southern Night Lane
City and County	Genthersburg Montgomen Counte
State and Zip Code	Maryland 20879
Telephone Number	301-978-6417
E-mail Address	

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Name
Job or Title
(if known)

Street Address
City and County
State and Zip Code
Telephone Number
E-mail Address
(if known)

Defendant No. 1

Liften Lacson Allen LLP

Lacson Allen LLP

South Sixth Street South S

Defendant No. 2	
Name	
Job or Title	
(if known)	
Street Address	
City and County	
State and Zip Code	3
Telephone Number	
E-mail Address (if known)	
Defendant No. 3	
Name	
Job or Title	
(if known) Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (if known)	
providing the same in	an three defendants, attach an additional page iformation for each additional defendant.)
Place of Employment	
The address at which I sough is:	t employment or was employed by the defendant(s)
Name Street Address City and County State and Zip Code Telephone Number	Cliffon Lasson Allen LLP 11710 Beltsville Drive, Suite 300 Calverton Prince George's Country Maryland 20705 301-931-2050

C.

II. Basis for Jurisdiction

This action is brought for discrimination in employment pursuant to (check all that apply):



Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)



Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)

Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)

☐ Other federal law	(specify the federal law):
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☐ Relevant state law (sp	pecify, if known):
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 \square Relevant city or county law (specify, if known):

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A.	The discriminatory conduct of which I complain in this action includes (check all that apply):	
	☐ Failure to hire me.	
	Termination of my employment.	
	Failure to promote me.	
	☐ Failure to accommodate my disability.	
	Unequal terms and conditions of my employment.	
	Retaliation.	
	Other acts (specify): DesCrimination based on my Age and Race	
	(Note: Only those grounds raised in the charge filed with the Equal	
	Employment Opportunity Commission can be considered by the federal	
	district court under the federal employment discrimination statutes.)	
B.	It is my best recollection that the alleged discriminatory acts occurred on date(s)	
	September 21, 2015 to May 9, 2016	
C.	I believe that defendant(s) (check one):	
	is/are still committing these acts against me.	
	is/are not still committing these acts against me.	
D.	Defendant(s) discriminated against me based on my (check all that apply and	
	explain):	
	race Back	
	Color	
	gender/sex	
	religion	
	national origin	
	age. My year of birth is 1961. (Give your year of birth	
	only if you are asserting a claim of age discrimination.)	
	disability or perceived disability (specify disability)	

E.	The base The ALE (Note: As ac	my case are as follows. Attach additional pages if needed. VII of the Girl Right Hof = Aigenty in Race (Black) Here Description in Employment Hope Description in Employment Hope Description based on Age attached EEOC Charse diditional support for the facts of your claim, you may attach to this copy of your charge filed with the Equal Employment Opportunity
	Commission, division.)	or the charge filed with the relevant state or city human rights
Exhai	ustion of Fede	eral Administrative Remedies
Α.	Opportunity regarding the	recollection that I filed a charge with the Equal Employment Commission or my Equal Employment Opportunity counselor defendant's alleged discriminatory conduct on (date)
В.	The Equal Er	mployment Opportunity Commission (check one):
٠		has not issued a Notice of Right to Sue letter. issued a Notice of Right to Sue letter, which I received on (date) August 22, 2019 (Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)
C. ,	Only litigants	salleging age discrimination must answer this question.
		ny charge of age discrimination with the Equal Employment Commission regarding the defendant's alleged discriminatory (k, one) :
		60 days or more have elapsed. less than 60 days have elapsed.

IV.

V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

discriminating against her race e awarded liquidated damages doubling the award of interest wasos, Loss Employment benefits and other compans Compensation To her as a result of defendants discriminating against her on the basis of be awarded her costs, attorney's fees, vitness fees, expenses related to after relief that this court deems and appropriate.

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where caserelated papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	address on the with the Clerk's Office may result in the dismissal of my		
	Date of signing: NW.12	_, 2019	
	Signature of Plaintiff Printed Name of Plaintiff	Paula B. Ajisefinný Paula Bolante Ajisefinn	
		laintiff is named in the complaint, attach an additional mature page for each additional plaintiff.)	
В.	For Attorneys		
	Date of signing:		
	Signature of Attorney		
	Printed Name of Attorney		
	Bar Number		
	Name of Law Firm		
	Address		
	Telephone Number		
	E-mail Address		